Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>07/10/2010</u>	Address:	1404 Maple St.
Case #:	<u>22F45994</u>		Kendallville, IN 46755
County:	Noble (57)		
T 0.T			
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
☐ Operational Lab ☐ Chemical/Glassware/Equipment (only)		Residence Outbuilding	Hotel/Motel
Dumpsite (only)		Vehicle	☐ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply)			
Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Solvents: <u>Living Room</u>			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid: Spare Bedroom			
Corrosive Base: Spare Bedroom			
Other (item and location): Ammonia Sulfate			
Child under age 18 discovered (check one)			e Information
Yes (number present) ☐ Ephedrine/Pseudoephedrine Tracking Lo No ☐ Retail/Merchant Tip			
—	port to Child Protective Services	Other:	*
This report is to be faxed to the following agencies that serve the location:			
•	-	Fax: (260)	
	artment: Noble Co.	Fax: (260)	<u>636-2192</u>
Child Prote	ction Service: <u>N/A</u>	Fax: <u>N/A</u>	
For further information regarding this methamphetamine laboratory, contact			
Investigating Officer: <u>David Caswell</u> Phone (260) 432-8661			
** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department			
listed within 24 hours of scene processing. *** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.			